

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well
GAS

2. Name of Operator
BURLINGTON RESOURCES OIL & GAS COMPANY

3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M
790' FSL, 1845' FEL, Sec. 23, T-28-N, R-6-W, NMPM
DHC-2568

5. Lease Number
NM-02804

6. If Indian, All. or Tribe Name

7. Unit Agreement Name

8. Well Name & Number
San Juan 28-6 Unit
San Juan 28-6 U #138M

9. API Well No.
30-039-26252

10. Field and Pool
Blanco MV/Basin DK

11. County and State
Rio Arriba Co, NM

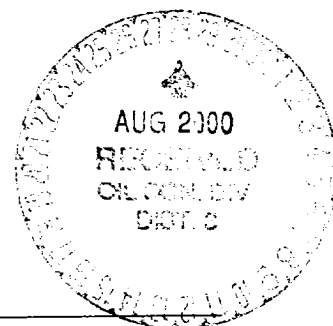
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission	Type of Action	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other - Spud	

13. Describe Proposed or Completed Operations

5-10-00 MIRU. Spud well @ 3:00 p.m. 5-10-00. Drill to 248'. Circ hole clean. TOOH.
TIH w/5 jts 9 5/8" 32.3# WC-50 ST&C csg, set @ 240'. Pump 20 bbl wtr ahead.
Cmt'd w/195 sx Class "B" neat cmt w/3% calcium chloride, 0.25 pps Cellophane
(230 cu.ft.). Displace w/16.5 bbl wtr. Circ 16.5 bbl cmt to surface. WOC.
5-11-00 NU BOP. PT BOP & csg to 600 psi/30 min, OK. Drilling ahead.

APD ROW related



14. I hereby certify that the foregoing is true and correct.

Signed [Signature] Title Regulatory Supervisor Date 5/11/00

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____ 2000

CONDITION OF APPROVAL if any: